_____	:	COURT OF COMMON PLEAS OF
PLAINTIFF	:	INDIANA COUNTY
	:	PENNSYLVANIA
v.	:	
	:	
_____	:	No: _____
DEFENDANT		

PETITION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

1. I am the Plaintiff/Defendant in the above matter and because of my financial condition am unable to pay the fees and costs of prosecuting or defending the action or proceeding.

2. I am unable to obtain funds from anyone, including my family and assocaites, to pay the costs of litigation.

3. I am proceeding pro se in this action because I cannot afford legal services.

4. I represent that the information below relating to my ability to pay the fees and costs is true and correct:

a. Name: _____

Address:_____

_____

Social Security Number: _____

b. Employment

If you are presently employed, state:

Employer_____

Address:_____

_____

Salary or wages per month:_____

Type of work:_____

If you are presently unemployed, state:

Date of last employment_____

Salary or wages per month_____

Type of work:_____

c. Other income within the past twelve months

Business or profession_____

Other self-employment_____

Interest_____

Dividends_____

Pension and annuities_____

Social security benefits_____

Support payments_____

Disability payments_____

Unemployment compensation and supplemental benefits_____

_____

Workman's compensation_____

Public assistance_____

Other:_____

_____

d. Other contributions to household support:

(Wife)(Husband) Name_____

If your spouse is employed, state:

Employer:_____

Salary or wages per month:_____

Type of work_____

Contributions from children_____

Contributions from parents _____

e. Property owned:

Cash_____

Checking account_____

Savings account_____

Certificates of deposit_____

Real estate (including home)_____

Motor vehicle: Make_____ Year_____

Cost_____ Amount Owed_____

Stocks, bonds_____

Other:_____

f. Debts and obligations

Mortgage_____

Rent_____

Loans_____

Other_____

_____

g. Persons dependant upon you for support:

(wife)(husband) Name_____

Children, if any:

Name_____ Age_____

_____ _____

_____ _____

Other persons:

Name:_____

Relationship:_____

5. I understand that I have a continuing obligation to inform the court of improvement in my financial circumstances which would permit me to pay the costs incurred herein.
6. I verify that the statements made in this affidavit are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. § 4904, relating to unsworn falsification to authorities.

Date_____ Petitioner_____

_____	: **IN THE COURT OF COMMON PLEAS**
	: **INDIANA COUNTY, PENNSYLVANIA**
Plaintiff,	: **Civil Action - Law**
	:
vs	: **NO. _____ CD 20_____**
	:
_____	:
	:
Defendant.	:

ORDER OF COURT

AND NOW, this _____ day of _____ 20_____, it is hereby ORDERED that the applicant's Petition for Leave to Proceed In Forma Pauperis is GRANTED.

BY THE COURT,

_____